ENTRY BLA	NK			1		
PLEASE TYPE OR PRINT			Entered previous May Show			
		<b>⊠</b> y	es 🗆	no		
☐ Ms. ☑ Mr. Artist_	PAtrick	K. Corr	igan			
IVIT. ATTIST	11101 11011	*		Name Last)		
Permanent Adress	14210 Ce	edar Rd.	G-1	Univ.	Ht	
	reet		Cit			
44118	Tel. (	216-38	32-87	71		
Zip	Area Code					
Temporary or Studio Address	same			_		
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If you do not po Western Reserve					_	
Collaborator	(If Any)	9			-	
If May Show en  Artist will p  Museum sho  Museum sho	oick up at Muse ould dispose of.	um.		ess:		
Special Instruct When necessary the object is to	include below		or a draw	ing of how	_	
This entry blank			I signed.	Unsigned		

S.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until August 21, 1977.

The submission of objects will be construed as acceptance of all conditions printed in the entry information. Signature Souther A Con

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ENTRY BLANKS									
		©S ■ 3. Photography  □ 6. Crafts							
Materials									
Title									
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